



# ‘iada

International Alliance  
for Diabetes Action

2025 Annual Report



# Table of Contents

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Reflections on the Year	3
Who We Are	4
2025 at a Glance	5
2025 Highlights	6
Working Streams	7
Snapshot of Working Stream Highlights	8
Symposium and Shared Learning	10
Person-Centered Engagement	11
Our Alliance	12
Partnerships and Governance	13
Finance	14
Looking Forward	15
IADA Team	16

## Reflections on the Year

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The year 2025 marked a period of profound change for the humanitarian system. Escalating and protracted crises, combined with significant global funding constraints, challenged health systems and humanitarian actors worldwide to do more with less. At the same time, the global burden of diabetes continues to rise, increasingly intersecting with humanitarian emergencies and exposing persistent gaps in care for people living with diabetes.

In this context, IADA's role as a collective impact initiative became more important than ever. While our partners lead implementation in the field, IADA's role throughout 2025 focused on strengthening the conditions that enable effective action: convening diverse partners, facilitating shared learning, identifying evidence and policy gaps, and creating space for collaboration. The progress reflected in this report is the result of our members and partners working, often in challenging circumstances, to advance care for people with diabetes.

This past year also marked an important moment of reflection for the alliance. As we reached the end of IADA's 2023–2025 Strategic Plan, partners, Board members, and the Secretariat engaged in a collaborative process to assess what we have built together and to chart our path forward. These conversations reinforced why this alliance exists: because **no single organization can address diabetes in emergencies alone**. Your insights shaped our priorities and underscored the value of IADA as an independent platform for collective action in an increasingly complex humanitarian landscape.

We are deeply grateful to our members, partners, advisors, and collaborators for their commitment, trust, and generosity of time. In a year when resources were constrained and demands were high, your willingness to engage, share, and collaborate made this work possible.

As we look ahead, IADA remains committed to supporting collective action that improves access to quality, person-centered diabetes care for people affected by humanitarian crises. The challenges ahead are significant, but so is the strength of this alliance.

On behalf of the IADA Board and Secretariat,



Sylvia Kehlenbrink

Executive Director

# Who We Are

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IADA's mission is to improve access to high-quality, **person-centered** diabetes care for people in humanitarian crises. This complex challenge cannot be addressed by any single organization alone, which is why IADA brings together **diverse organizations in collective action**.

IADA operates as a collective impact initiative, aligning stakeholders around a **shared agenda**, learning, and mutually reinforcing activities. Through convening, technical coordination, identification of evidence and policy gaps, and support for collective advocacy, IADA enables partners to work together more effectively. A Secretariat serves as the backbone of the alliance, while implementation is led by members and partners.

Since 2019, IADA has evolved from an informal network into a structured alliance with formal membership, governance, and dedicated Secretariat. This evolution reflects a shared commitment to **long-term collaboration** and **collective solutions** to diabetes care in humanitarian settings.



*Attendees from the Inaugural Symposium on Diabetes in Humanitarian Crises, 2019, Boston, MA*



*Jagan Chapagain,  
CEO & Secretary General IFRC, keynote remarks  
at the UN HLM4 Side Event, September 2025,  
New York City, Photo Credit: IFRC*

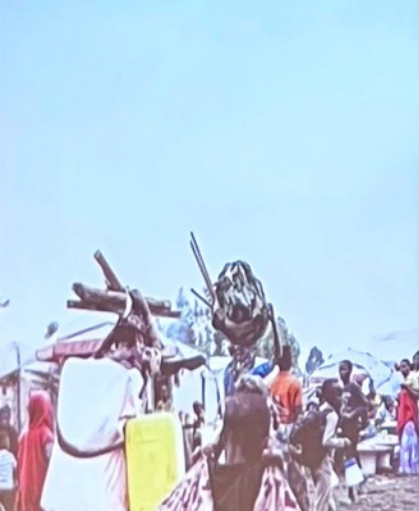
## 2025 at a Glance

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Throughout 2025, IADA contributed to global and regional convenings that **strengthened partner alignment** and elevated diabetes in humanitarian settings within global policy and practice. A major focus was the Fourth United Nations High-Level Meeting on the Prevention and Control of Noncommunicable Diseases (NCDs) and the Promotion of Mental Health and Wellbeing [🔗](#) (HLM4), which provided a critical opportunity to advance **collective advocacy** for NCD care—including diabetes—in humanitarian contexts.

In the lead-up to and during the HLM4, IADA worked alongside members and collaborating organizations to coordinate messaging, foster shared learning, and support joint advocacy at key milestone meetings, reinforcing the visibility of diabetes in emergencies within broader NCD and humanitarian agendas.

These collective efforts contributed to a **successful outcome** — the Political Declaration passed at HLM4 included explicit reference to humanitarian settings, marking an important milestone for the field.



5th Symposium on

# DIABETES IN HUMANITARIAN CRISES



Day 1 - 16 October 2025

Geneva, Switzerland



Emma Klaitman at the Symposium on Diabetes in Humanitarian Crises, October 2025, Geneva

## 2025 Highlights



# Working Streams

IADA organizes its work **across four interconnected thematic working streams**, each advancing a distinct set of priorities while contributing to the shared collective agenda. Streams are guided by IADA Team Leads and shaped by active engagement from partners.

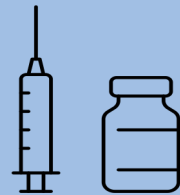
1



## Clinical & Operational Support

Seeks to strengthen the delivery and quality of diabetes care in humanitarian crises by expanding access to practical guidance, tools, and implementation resources.

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## Access to Medicines & Diagnostics

Works to improve the availability and affordability of essential medicines, diagnostics, and technologies needed for effective diabetes management in humanitarian settings.

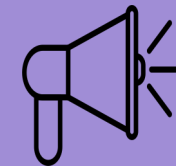
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## Data & Research

Aims to foster research collaboration, advance shared research agendas, and strengthen data systems for monitoring, learning, and evaluation.

4



## Financing & Policy

Seeks to promote the integration of diabetes care into humanitarian policy frameworks and funding mechanisms to ensure sustainable, long-term support.

# Snapshot of Working Stream Highlights

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## 1. Clinical & Operational Support

- Advanced priorities on clinical guidelines, nutrition, and diabetes in pregnancy through dedicated multistakeholder working groups.
- Launched an Acute Crisis Response Protocol and Country Mapping initiative to improve coordination of insulin provision during emergencies.
- Contributed expertise to the WHO Type 1 Diabetes Guideline Committee process.



## 2. Access to Medicines & Diagnostics

- Convened partners through an informal glucagon-like peptide-1 (GLP-1) Access Working Group, contributing to a successful submission supporting inclusion of GLP-1 receptor agonists on the WHO Essential Medicines List for type 2 diabetes. [↗](#)
- Supported dissemination of findings from the HumAn-1 trial [↗](#) on the effectiveness of long-acting insulin in low-resource settings through international scientific forums, and helping to inform future WHO guidelines on pediatric type 1 diabetes.
- Initiated planning for a follow-up to the UNITED study, a multi-partner effort to assess diabetes service provision across humanitarian settings.



# Snapshot of Working Stream Highlights (contd.)

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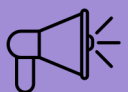
## 3. Data & Research

- Advanced a consensus-building process on standardized indicators with the informal Interagency Working Group on NCDs in Emergencies.
- Led a collaborative research prioritization exercise during the Annual Symposium, bringing together researchers and practitioners to identify key questions, and coordinated the abstract review process to showcase emerging research in the field.
- Established a nutrition research partnership with Johns Hopkins University, including a landscaping review on food security and diabetes in humanitarian contexts.



## 4. Financing & Policy

- Co-organized and supported high-level events at major global forums in the lead-up to HLM4, including the IFRC's Global Advocacy Bootcamp, the 78th World Health Assembly, and the UN High-Level Meeting itself.
- Contributed to securing inclusion of humanitarian settings within the HLM4 Political Declaration.
- Contributed to collaborative advocacy reports and peer-reviewed publications highlighting the growing burden of NCDs in emergencies.





*Symposium attendees, October 2025, Geneva*

## Symposium and Shared Learning

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A cornerstone of our coordination efforts in 2025 was the **5th Symposium on Diabetes in Humanitarian Crises**, co-hosted with **The London School of Hygiene and Tropical Medicine Centre for Global Chronic Conditions** and **Mass General Brigham**. This gathering brought together nearly 130 participants from all six global regions, creating space for cross-sector dialogue and collaboration.

The program featured plenary and interactive sessions, research abstract poster displays, and a cultural event that encouraged informal exchange and community building. Together, these components created a platform for shared learning, showcasing partner-led research and field innovations, while elevating lived and operational perspectives.

Discussions identified emerging priorities and directly informed our collective strategic direction. Session videos, abstracts, and summary reports are available on our website. [🔗](#)

# Person-Centered Engagement

Across all of our work, IADA **prioritizes meaningful engagement** with people who are living with diabetes through humanitarian crises. We believe that centering their lived experience in our work leads to more responsive programs, stronger partnerships, and more equitable outcomes.

At the Symposium, IADA convened partners to share existing engagement practices and to identify opportunities to **strengthen person-centered approaches across the alliance**. Insights from these conversations are actively shaping the development of an engagement framework to guide meaningful engagement across IADA's work.



*Meaningful engagement workshop at the Symposium, October 2025, Geneva.  
Left to right: Kiran Jobanputra, Beatrice Vetter, Cyzine Farhat, Mohammed Seyam, James Elliot.*

# Our Alliance

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IADA's strength lies in the **diversity and commitment** of its member and collaborating organizations, spanning humanitarian agencies, academia, civil society, and UN partners.

The alliance began as an informal network of more than 150 organizations united by a shared commitment to improving diabetes care in humanitarian settings. That spirit of **openness** and **collaboration** remains central to who we are.

# Our Members

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To strengthen governance, accountability, and long-term sustainability, IADA introduced a formal membership process, starting with its founding members. The alliance now has ten organizations officially signed on. Formal membership has been intentionally phased to align with strengthened governance processes, and we look forward to growing this community together and welcoming more organizations in the coming year.

## Full Members

- Harvard Humanitarian Initiative (HHI)
- International Committee of the Red Cross (ICRC)
- International Federation of the Red Cross and Red Crescent Societies (IFRC)
- International Rescue Committee (IRC)
- Johns Hopkins Center for Humanitarian Health
- The London School of Hygiene and Tropical Medicine (LSHTM) Centre for Global Chronic Conditions
- Médecins Sans Frontières (MSF)
- Primary Care International (PCI)
- Santé Diabète

## Associate Members

- International Society for Pediatric and Adolescent Diabetes (ISPAD)

# Partnerships and Governance

Beyond formal membership, IADA continues to engage with the **broader global community**.

In 2025, we joined the **NCD Alliance** as an associate member and continue to participate in the **WHO Global Diabetes Compact**. IADA also successfully completed the **WHO Framework for Engagement with Non-State Actors (FENSA)** process, which facilitates our ongoing engagement with WHO country and regional offices as well as **Ministries of Health**.



*Type 1 Diabetes International Meeting, February 2025, Copenhagen.*

*Left to right: Mahmoud Tharwat, Philippa Bouille, Getahun Tarekegn, Stéphane Besançon, Sana Ajmal.*

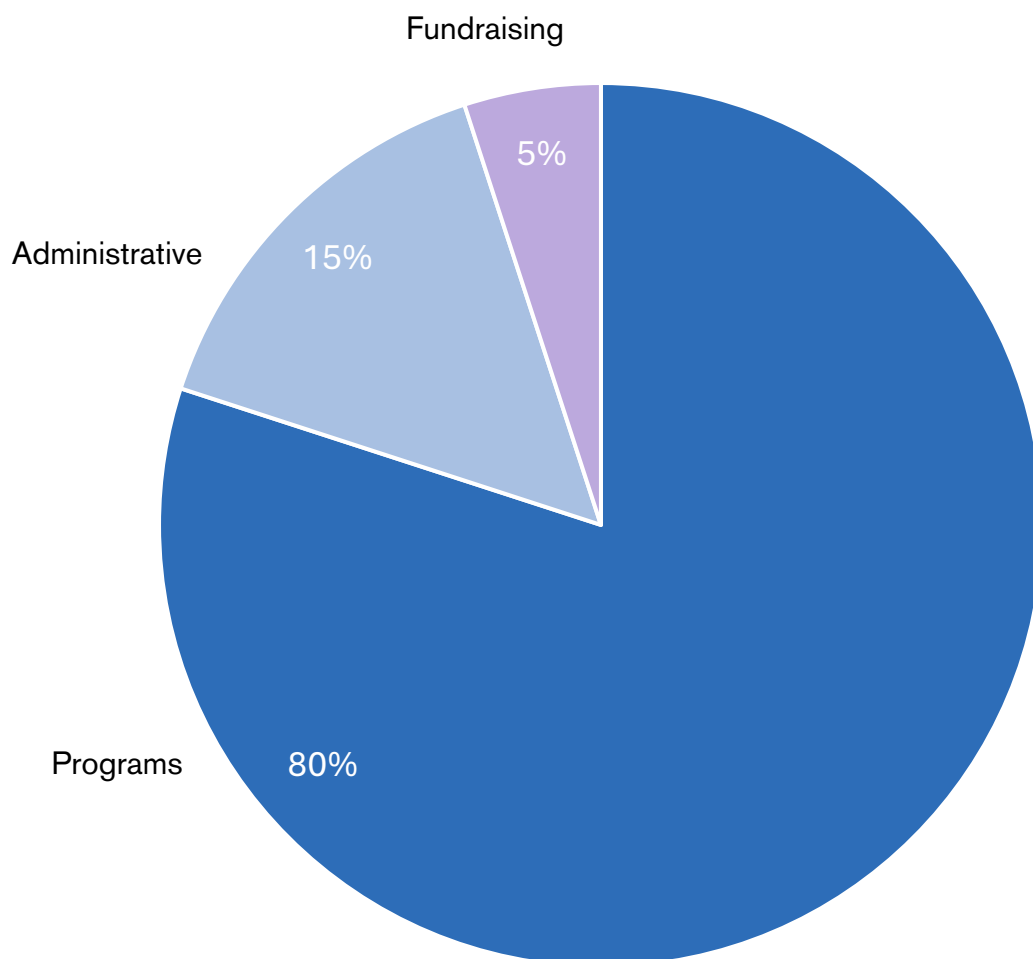
# Finance

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## 2025 Funding

We are deeply grateful to **The Leona M. and Harry B. Helmsley Charitable Trust**, whose generous seed funding represented 88% of our income in 2025 and made this year's progress possible. Individual donors and investments contributed the remaining 12%, and we are grateful for the trust and generosity of every supporter.

### How We Use Our Funds



### Financial Oversight

IADA is committed to **responsible stewardship, transparency, and financial integrity**. Financial management and reporting were overseen by the Board of Directors and an independent financial review conducted by BDO confirmed sound fiscal stewardship.

### Funding Policy

A key priority for 2026 is to **diversify funding sources** while adhering to IADA's funding policy, which safeguards the alliance's independence and credibility. To maintain public trust and ensure our ability to convene diverse stakeholders, IADA does not accept support from industries that could compromise our mission. This includes organizations associated with alcohol, tobacco, nicotine, and arms, as well as medical supply manufacturers, pharmaceutical companies, or food and beverage companies producing ultra-processed foods high in fat, sugar, and/or salt.



Copyright: Mohammad Ghannam/MSF, Chad, Sudan

# Looking Forward

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The work accomplished in 2025 **laid critical foundations** for the next phase of our collective impact. As humanitarian needs continue to grow amid constrained resources, we will focus on **translating alignment into action** - supporting partners to strengthen service delivery, implement collaborative research, and advance policy changes that improve outcomes for people living with diabetes in humanitarian settings.

We are grateful to every member, collaborating organization, and supporter who made 2025 a year of meaningful progress. Together, we are building a more **coordinated and effective response** to diabetes in humanitarian crises.

For more information about IADA and our forthcoming 2026–2030 Strategic Plan, visit [www.iadadiabetes.org](http://www.iadadiabetes.org)

# IADA Team

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IADA is guided by a **Board of Directors** and supported by a dedicated **Secretariat** that serves as the backbone for coordination, facilitation, and strategic leadership across the alliance.

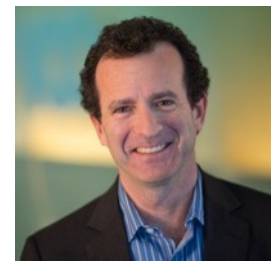
## Board of Directors



**Lilian Kiapi (Chair)**

Resolve to Save Lives

London School of Hygiene and Tropical Medicine



**Paul Spiegel**

Johns Hopkins Center for Humanitarian Health



**Rachel Nugent (Treasurer)**

University of Washington



**Sylvia Kehlenbrink (nonvoting)**

Mass General Brigham

Harvard Humanitarian Initiative



**Bayard Roberts**

London School of Hygiene and Tropical Medicine



**Kiran Jobanputra (nonvoting)**

World Health Organization



**Stéphane Besançon**

Santé Diabète

# IADA Team

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## Secretariat



**Sylvia Kehlenbrink**

Executive Director, Team Lead,  
Clinical and Operational Support  
Mass General Brigham



**Philippa Boule**

Team Lead,  
Clinical and Operational Support  
Médecins Sans Frontières (MSF)



**Jay Bagaria**

Team Lead, Financing and Policy  
Global Public Health Consultant



**Kiran Jobanputra**

Chief Strategy Officer  
World Health Organization



**Jing Luo**

Team Lead,  
Access to Medicines and Diagnostics  
University of Pittsburgh



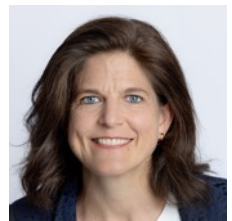
**Eiman Hag\***

Team Lead, Financing and Policy,  
Project Lead  
Global Public Health Consultant



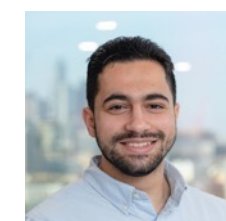
**Anna Nakayama**

Program and Community Manager



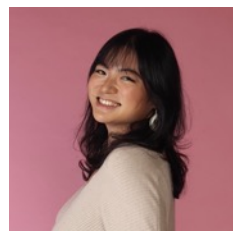
**Beatrice Vetter\***

Team Lead,  
Access to Medicines and Diagnostics  
Global Health Consultant



**Mohammed Seyam\***

Project Officer  
Hasso Platner Institute



**Kelly Lai\***

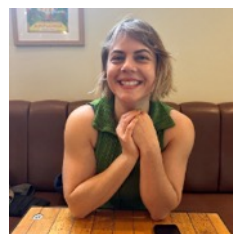
Program Coordinator



**Éimhín Ansbro**

Team Lead, Data and Research  
London School of Hygiene and  
Tropical Medicine

\*joined in 2025




**Emma Klatman**

Advocacy and Engagement Officer  
Life for a Child



**Angelica Sarteau**

Team Lead, Data and Research  
Vanderbilt University

A smiling man with a short beard and mustache, wearing a blue and white striped button-down shirt, is the central focus of the image. He is standing in a room with a corrugated metal ceiling and walls. In the background, several papers are pinned to the wall, some with handwritten text. The lighting is warm and natural, coming from a window or skylight above.

# iada

International Alliance  
for Diabetes Action

For more information about IADA  
please visit our website—  
[iadadiabetes.org](http://iadadiabetes.org)

Or contact us at:  
[general@iadadiabetes.org](mailto:general@iadadiabetes.org)